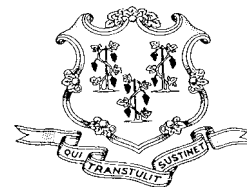




For Office Use only. Certification Number: _____

DEPARTMENT OF PUBLIC SAFETY
DIVISION OF STATE POLICE
1111 Country Club Road Middletown, CT 06457-9294



Security Officer Training Instructor Application

Check Type of Approval Desired:					
Public: <input type="checkbox"/> Criminal Justice <input type="checkbox"/> First Aid <input type="checkbox"/> Security Officers Firearms (Blue Card)			In House ONLY: <input type="checkbox"/> Criminal Justice <input type="checkbox"/> First Aid <input type="checkbox"/> Security Officers Firearms (Blue Card)		
Personal Information:					
Name of Applicant		Date of Birth		Place of Birth	
Have you ever used any other names? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state all other names used:					
Address <small>*Any person approved as an instructor shall notify the Department of Public Safety of any change of address not later than 2 business days after the change of address.</small>					
Home Telephone Number			Work/Business Telephone Number		
E-mail Address					
Drivers License Number/Issuing State					
Are you currently vested with police powers? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state agency or authority:					
Race	Sex	Height	Weight	Eye Color	Hair Color
Conviction Information:					
Have you ever been convicted of a violation of law, including any motor vehicle criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>With regard to criminal history information arising from the State of Connecticut's jurisdiction: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes Sections 46b-146, 54-76o or 54-142a. With regard to criminal history information arising from jurisdictions other than the State of Connecticut: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to the law of the other jurisdiction. Additionally, you are not required to disclose the existence of an arrest arising from another jurisdiction if you are permitted under the law of the other jurisdiction to swear under oath that you have never been arrested.</small>					
List convictions below:					
Conviction Date		Jurisdiction Court		Charge	

Military Service:				
Have you served in the United States Military? <input type="checkbox"/> Yes <input type="checkbox"/> No				
*Attach a copy of DD-214, if applicable.				
Military Branch or Component	Highest Rank Attained	Type of Discharge (If Applicable)	Duties	
Employment History:				
List all positions held within the last five (5) years. Additionally, list all employment experience which you believe qualifies you to conduct training in the subject(s) for which you are seeking certification. For each place of employment, provide name of employer, address, telephone number, dates of employment and name of immediate supervisor. (Begin with present or most current employer. Attach additional page if necessary.)				
Education and Training: (Include all training which you believe qualifies you to conduct training in the subject(s) for which you are seeking approval.)				
Degree/Certificate/Course	Date Degree/Certificate Awarded and/or Dates Course Taken	Name and Address of Institution		
Course of Instruction Information:				
Business Name that Lesson Plan is Submitted Under:		Business Address:		
Business Telephone Number:		Class Location:		
Prior Application for Approval:				
Have you made any prior application for approval as a security service licensee, a security officer or an instructor in the security industry, in Connecticut or any other jurisdiction, including any sovereign nation?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, provide information below concerning the status of any such application and/or certification:				
State/Jurisdiction	Date of Application and/or Approval	Status (Including any denials, revocations, suspensions, sanctions, discipline, etc.)	Certification/License Number	Date Certification/License Expires

Legal Status/Pistol Permit Status: (This section to be completed only by those who will conduct the Security Officer Firearms Training)

Are you a U.S. citizen? ☐ Yes ☐ No If no, list Alien Registration No.:

If naturalized, state date and place of naturalization and naturalization #

*Attach proof of citizenship or legal residency. Acceptable proof includes one the following:

- Birth Certificate, U.S. Passport or Voter's Registration Card
- Naturalized Citizens require Naturalization Certificate or U.S. Passport.
- Legal Resident Aliens require Permanent Resident ID issued by I.C.E. and a 90-day proof of residency.

First Aid Certification: (This section to be completed only by those who will conduct the First Aid Training)

First Aid Certification Number:

Date First Aid Certification Expires:

*Attach a copy of your First Aid Certification

Certification:

I SWEAR UNDER PENALTY OF FALSE STATEMENT, PURSUANT TO CONNECTICUT GENERAL STATUTES SECTION 53a-157b, THAT MY RESPONSES TO THIS FORM, ABOVE, ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signed _____

STATE OF _____

SS, _____

COUNTY OF _____

Subscribed and sworn to before me this _____ day of _____ 200_____.

Name:

Notary Public

My Commission Expires: _____

Commissioner of Superior Court

Submit the following items with this application. (Use check boxes to indicate items are attached.)

- ☐ Twenty (\$20.00) Dollar Certification Fee ☐ Two photographs (2" x 2" passport style) taken within the last six (6) months
- ☐ Two fingerprint cards – 1 green (state card) with \$25.00 payable to Department of Public Safety and 1 blue (FBI card) with \$19.25 payable to the Department of Public Safety. Submit prints with bank or postal money order only.
- ☐ New course material updating security officers firearms training and/or criminal justice training to reflect Public Act No. 08-73
- ☐ DD-214 or military discharge documentation (if applicable)
- ☐ First aid certification (if applicable)